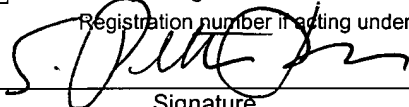


PTO/SB/22 (10-04)

Approved for use through 7/31/2006. OMB 0651-0031

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005		Docket Number (Optional) 06727/100H935-US1	
Application Number 10/776,367		Filed February 10, 2004	
For ELECTRONIC SHELF LABEL SYSTEMS AND METHODS			
Art Unit 2876		Examiner KUMIKO C. KOYAMA	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120.00	\$60.00 \$ 60.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	N/A	N/A \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	N/A	N/A \$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	N/A	N/A \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	N/A	N/A \$
<input type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100. I have enclosed a duplicate copy of this sheet.		
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number 25,351	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)	
 Signature		December 10, 2004 Date	
S. Peter Ludwig Typed or printed name		(212) 527-7770 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of 1 forms are submitted.		

Express Mail Label No.

Dated: _____

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